PAGE 1 / 18

Image# 201605189015534760

FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM	/I 3X	For Other	Than An A	uthorized	Commit	tee			
1. NAME (	<b> </b>	TYPE OR	PRINT ▼	Eva	ımple: If typ	ning type		Office Us	se Only
	TTEE (in full)		· · · · · · · · ·		r the lines.	ing, type	12FE4M	5	
LATINO	VICTORY FL	JND	1 1 1 1	1 1 1 1			1 1 1 1		
ADDRESS (	number and street)	700 14TI	H STREET NW,	2ND FLOOI	₹ , , , ,				
ADDITESS (	number and street)								
tha	eck if different n previously orted. (ACC)	WASHIN	IGTON				DC	20005	; ,
2. <b>FEC ID</b>	ENTIFICATION N	UMBER ▼		CITY 🛦			STATE ▲		ZIP CODE ▲
C	C00562777		3.	IS THIS REPORT	×	NEW (N) <b>OR</b>		MENDED A)	
4. TYPE (Choose	OF REPORT	(b) Mor Rep		Feb 20 (M2)	×	May 20 (M5)	Au	g 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
`	arterly Reports:	Due	On:	Mar 20 (M3)		Jun 20 (M6)	Se	p 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
П	April 15			Apr 20 (M4)		Jul 20 (M7)	Oc	t 20 (M10)	Jan 31 (YE)
	Quarterly Report (0	Q1) (c)	12-Day		Primary (12	2P)	Genera	l (12G)	Runoff (12R)
	Quarterly Report (6	Q2)	PRE-Election Report for the	e:	Convention	(12C)	Special	(12S)	
Щ	Quarterly Report (	Q3)			M = M .	/ D D /	YIYIYI	Y	in the
Ш	January 31 Year-End Report (	YE)	Ele	ection on					State of
	July 31 Mid-Year Report (Non-election Year Only) (MY)		30-Day POST-Election Report for the		General (30	OG)	Runoff	(30R)	Special (30S)
	Termination Report (TER)	i	Ele	ection on	M = M	/ D D /	Y = Y = Y =	Y	in the State of
5. Coverin	g Period 0	4 01		6	through	04_	/ 30 B	201	16
I certify that	I have examined to	his Report a	and to the best	t of my kno	wledge and	belief it is tr	rue, correct a	nd complet	te.
Type or Prin	t Name of Treasure	er Sara Le	Brusq						
Signature of	Treasurer Sara	ı Le Brusq			[Electronical	lly Filed]	Date 05	M / D 10	
NOTE: Subm	ission of false, error	neous, or inc	omplete informa	ation may su	ubject the pe	erson signing	this Report to	the penaltic	es of 2 U.S.C. §437g.
ı   U	fice lse								FORM 3X Rev. 12/2004
0	nly			l		1		1 "	

**SUMMARY PAGE** OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name LATINO VICTORY FUND 04 2016 04 30 2016 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 76180.05 January 1, 2016 (b) Cash on Hand at 239648.99 Beginning of Reporting Period..... 138650.00 343706.04 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 419886.09 378298.99 6(a) and 6(c) for Column B)..... 189534.71 231121.81 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 188764.28 188764.28 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 1839.00 Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact:

> Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

### LATINO VICTORY FUND

Contributions (other than loans) From:  a) Individuals/Persons Other Than Political Committees	Total This Period	Calendar Year-to-Date
a) Individuals/Persons Other		
Than Political Committees		
man i onical committees		
(i) Itemized (use Schedule A)	2500.00	33750.00
	1150.00	2956.03
	0050.00	36706.03
Lines 11(a)(i) and (ii)▶	3650.00	36706.03
b) Balitical Barty Committee	0.00	500.00
	3.00	7 7 7
·	0.00	11000.00
	3650.00	48206.03
	0.00	0.00
,		
II Loans Received	0.00	0.00
	, , , , , , , , , , , , , , , , , , , ,	
oan Repayments Received	0.00	0.00
	7	
- · · · · · · · · · · · · · · · · · · ·		
· · · · · · · · · · · · · · · · · · ·	0.00	0.00
		7
Federal Candidates and Other		
Political Committees	0.00	0.00
Other Federal Receipts		
· · · · · · · · · · · · · · · · · · ·	135000.00	295500.01
(from Schedule H3)	0.00	0.00
b) Levin Funds (from Schedule H5)	0.00	0.00
c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	(iii) TOTAL (add Lines 11(a)(i) and (iii)

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
<ol> <li>Operating Expenditures: —         <ul> <li>(a) Allocated Federal/Non-Federal</li> </ul> </li> </ol>		
Activity (from Schedule H4)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	1552.00	9479 49
Expenditures(c) Total Operating Expenditures	1552.09	8178.48
(add 21(a)(i), (a)(ii), and (b))▶	1552.09	8178.48
2. Transfers to Affiliated/Other Party	0.00	0.00
Committees	0.00	0.00
Federal Candidates/Committees and Other Political Committees	10000.00	20000.00
. Independent Expenditures	11000100	1,100,100
(use Schedule E)	146221.66	146221.66
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
(=== 00.1000.0 1)		
Loan Repayments Made	0.00	0.00
7. Loans Made	0.00	0.00
(a) Individuals/Persons Other		
Than Political Committees	0.00	500.00
(b) Political Party Committees	0.00	0.00
(b) Political Party Committees	0.00	
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds		
(add Lines 28(a), (b), and (c))▶	0.00	500.00
Other Disbursements	31760.96	56221.67
. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity		
(from Schedule H6)	0.00	0.00
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely	2.00	0.00
With Federal Funds	0.00	0.00
Lines 30(a)(i), 30(a)(ii) and 30(b)) ►	0.00	0.00
_		
. Total Disbursements (add Lines 21(c), 22,		20110: 21
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	189534.71	231121.81
. Total Federal Disbursements		
(subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	189534.71	231121.81

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	3650.00	48206.03
4. Total Contribution Refunds (from Line 28(d))	0.00	500.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3650.00	47706.03
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	1552.09	8178.48
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	1552.09	8178.48

## SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: (check only one) PAGE 6 OF 18 Use separate schedule(s)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X   11a
Any information copied from such Reports and State or for commercial purposes, other than using the na	ements may not be sold or used by any peame and address of any political committee	erson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  LATINO VICTORY FUND		
Name of Employer  Self-employed  Receipt For:  Primary  Other (specify) ▼	State Zip Code CA 90291  C  Description  Vriter  Aggregate Year-to-Date ▼  250.00	Date of Receipt  04 07 2016  Transaction ID: SA11AI.4798  Amount of Each Receipt this Period  250.00  Memo Item
Name of Employer City of Los Angeles Company C	State Zip Code CA 90013  C  Decupation City Council Aide  Aggregate Year-to-Date ▼  250.00	Date of Receipt  04 08 2016  Transaction ID: SA11AI.4804  Amount of Each Receipt this Period  250.00  Memo Item
Name of Employer  Entertainment One  Comparison For:	State Zip Code CA 91316  C  Decupation Consumer Products Licensing Aggregate Year-to-Date ▼  1000.00	Date of Receipt  04 04 2016  Transaction ID : SA11AI.4784  Amount of Each Receipt this Period  1000.00  Memo Item
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number only		1500.00

## SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: **PAGE** 7 OF 18 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

ITEMIZED RECEIPTS 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) LATINO VICTORY FUND Full Name (Last, First, Middle Initial) Monica Lozano Date of Receipt Mailing Address 8215 Tuscany Avenue 04 2016 06 City Zip Code State Transaction ID: SA11AI.4794 CA Playa Del Rey 90293 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer Occupation Aspen Institute Advisory Board Chair Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ricardo E. Oquendo Date of Receipt Mailing Address 400 E. 57th Street 04 26 2016 City State Zip Code Transaction ID: SA11AI.4813 NY New York 10022 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer Occupation Self-employed Attorney Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 250,00 Full Name (Last, First, Middle Initial) c. J. Steven Price Date of Receipt Mailing Address 230 E. South Temple Street 04 11 2016 City Zip Code State Transaction ID: SA11AI.4818 UT Salt Lake City 84111 Amount of Each Receipt this Period FEC ID number of contributing С 500.00 federal political committee. Memo Item Name of Employer Occupation Commercial Real Estate Price Realty Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1000.00 SUBTOTAL of Receipts This Page (optional)..... 2500.00 TOTAL This Period (last page this line number only).....

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SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 OF 18 (check only one)
		ay not be sold or used by any p	13 14 15 16 17  erson for the purpose of soliciting contributions et o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) LATINO VICTORY FUND	ig the name and a	dures of any pointed committee	e to goliok goliki bakini bilan gadi. goliililikee.
Full Name (Last, First, Middle Initial)  A. ACTBLUE  Mailing Address P.O. BOX 441146  City	State	Zip Code	Date of Receipt  04 24 2016
SOMERVILLE	MA	02144	Transaction ID : SA11C.4840  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C co	0401224	20.00 x Memo Item
Name of Employer	Occupation		Total Received Through Conduit
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼	]
Full Name (Last, First, Middle Initial) <b>B.</b>	1		Date of Receipt
Mailing Address			M = M / D = D / Y = Y = Y
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		
Name of Employer	Occupation		Memo Item
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼	
Full Name (Last, First, Middle Initial)  C.	I		Date of Receipt
Mailing Address			M = M / D = D / Y = Y = Y
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		
Name of Employer	Occupation		Memo Item
Receipt For:  Primary General  Other (specify)	Aggregate	Year-to-Date ▼	
SUBTOTAL of Receipts This Page (options	al)	1	0.00

TOTAL This Period (last page this line number only).....

0.00

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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 9 OF 18		
TEMIZED RECEIPTS	for ea	ich category of the ed Summary Page	(check only one)  11a		
			person for the purpose of soliciting contributions be to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full)  LATINO VICTORY FUND	)				
Full Name (Last, First, Middle Initial)  CHC BOLD PAC			Date of Receipt		
Mailing Address PO BOX 75357			04 12 2016		
City WASHINGTON	State Zip ( DC 200 <sup>-</sup>	Code 13	Transaction ID : SA17.4833  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C C00365536		100000.00		
Name of Employer	Occupation		Non-contribution Account		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-D	Date ▼ 100000.00			
Full Name (Last, First, Middle Initial)  3. New York Hotel Trades Cou	ncil Nonfederal COPE		Date of Receipt		
Mailing Address 707 Eigth Avenue			04 11 _ 2016 _		
City New York	State Zip ( NY 1003	Code 36	Transaction ID : SA17.4828  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		10000.00		
Name of Employer	Occupation		Memo Item  Non-contribution Account		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-D	Date ▼ 10000.00			
Full Name (Last, First, Middle Initial)  The Durst Organization LP			Date of Receipt		
Mailing Address One Bryant Park, 49	rth Floor		04 26 2016		
City New York	State Zip 0 NY 1003	Code 36	Transaction ID : SA17.4837  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С		15000.00		
Name of Employer	Occupation		Memo Item Non-contribution Account		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-D	Date ▼ 15000.00			

TOTAL This Period (last page this line number only).....

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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 10 OF 18 (check only one)	
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	11a 11b 11c 12 13 14 15 16 X 1	
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  LATINO VICTORY FUND	d Statements may the name and ac	y not be sold or used by any p ddress of any political committed	erson for the purpose of soliciting contributions e to solicit contributions from such committee.	
Full Name (Last, First, Middle Initial)				
Unite Here Local 6 Committee on P  Mailing Address 709 Eighth Avenue	olitical Educat	tion	Date of Receipt	
City New York	State NY	Zip Code 10036	04 11 2016  Transaction ID : SA17.4830  Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		10000.00	
Name of Employer	Occupation		Memo Item Non-contribution Account	
Receipt For:  Primary General  Other (specify) ▼	Aggregate `	Year-to-Date ▼ 10000.00		
Full Name (Last, First, Middle Initial)			Date of Receipt	
Mailing Address			M = M / D = D / Y = Y = Y	
City	State	Zip Code	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	С		Memo Item	
Name of Employer  Receipt For:  Primary General  Other (specify) ▼	Aggregate \	Year-to-Date ▼	]	
Full Name (Last, First, Middle Initial)			Date of Receipt	
Mailing Address			M = M / D = D / Y = Y = Y	
City	State	Zip Code	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.  Name of Employer	Occupation		Memo Item	
Receipt For:  Primary General  Other (specify)		Year-to-Date ▼		
SUBTOTAL of Receipts This Page (optional).		)	10000.00	
TOTAL This Period (last name this line number			135000.00	

TOTAL This Period (last page this line number only).....

to reach category of the botter provided to the provided by t	SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 11 OF 18		
Amount of Each Disbursement Full Name (Last, First, Middle Initial) LATINO VICTORY FUND  Full Name (Last, First, Middle Initial) LATINO VICTORY FUND  Full Name (Last, First, Middle Initial) LATINO VICTORY FUND  Full Name (Last, First, Middle Initial)  Amount of Each Disbursement Credit Card Processing Fees  Candidate Name  Office Sought:  House Seriate President Disbursement Crity State:  City State Zip Code Office Sought:  House Disbursement District:  Cardidate Name  Amount of Each Disbursement this Period  Cardidate Name  Amount of Each Disbursement this Period  Cardidate Name  Amount of Each Disbursement this Period  Cardidate Name  Memo Item  Subtroval of Each Disbursement this Period  Cardidate Name  Amount of Each Disbursement this Period  Car	TEMIZED DISBURSEMENTS	for each category of the	X 21b	22 23 24 25 26	
NAME OF COMMITTEE (in Full)  LATINO VICTORY FUND  Full Name (Last, First, Middle Initial)  First Data Corporation  Mailing Address 5666 Glenridge Connector NE Suite 2000  City Atlanta GA 30342  Fuppose of Disbursement Credit Card Processing Fees  Cardidate Name  Office Sought: Full Name (Last, First, Middle Initial)  The Campaign Workshop  Mailing Address 1660 L Street #506  Office Sought: Full Name (Last, First, Middle Initial)  Mailing Address  City Slate Primary General Gride Name  Office Sought: Full Name (Last, First, Middle Initial)  Date of Disbursement this Period  Amount of Each Disbursement this Period  Amount of Each Disbursement this Period  Category' Type  Office Sought: Full Name (Last, First, Middle Initial)  Date of Disbursement this Period  Amount of Each Disbursement this Period  Category' Type  Office Sought: Full Name Category' Type  Office Sought: Full Name Category' Type  Office Sought: Full Name Category' Type  Amount of Each Disbursement this Period  Category' Type  Memo Item  Table Disbursement this Period  Table Disbursement  Table Disbursemen					
Mailing Address 5665 Glenridge Connector NE Surie 2000 City State Zip Code Atlanta GA 30342 Purpose of Disbursement Credit Card Processing Foes City State: District: Full Name (Last, First, Middle Initial)  Full Name (Last, First, Middle Initial)  Full Name (Last, First, Middle Initial)  Full Name (Last, First, Middle Initial)  Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)  F	NAME OF COMMITTEE (In Full)	e and address of any pointe	ar committee to	Solicit Contributions from Such Committee.	
Mailing Address 5565 Glenridge Connector NE Suite 2000  City Atlanta GA 30342  Furpose of Disbursement Credit Card Processing Fees Candidate Name  Office Sought: Full Name (Last, First, Middle Initial)  The Campaign Workshop  Mailing Address Catigative Full Name Candidate Name  Disbursement For: Full Name Candidate Name  Catigative Type  Date of Disbursement Transaction ID: SB21B.4819  Amount of Each Disbursement this Period Category' Type  Memo Item  Transaction ID: SB21B.4819  Amount of Each Disbursement this Period Category' Type  Date of Disbursement  Transaction ID: SB21B.4819  Amount of Each Disbursement  Transaction ID: SB21B.4819  Amount of Each Disbursement Transaction ID: SB21B.4819  Amount of Each Disbursement  Transaction ID: SB21B.4819  Amount of Each Disbursement  Transaction ID: SB21B.4819  Transaction ID: SB21B.4819  Amount of Each Disbursement  Transaction ID: SB21B.4819  Transaction ID: SB21B.4				B (B)	
Mailling Address 55656 Glenridge Connector NE Suite 2000  City State Zip Code Attanta GA 30342  Purpose of Disbursement Credit Card Processing Fees  City Senate Primary General Other (specify) ▼ 51.30  District:  Full Name (Last, First, Middle Initial)  The Campaign Workshop  Mailing Address 1660 L Street #506  City State Zip Code DC 10038  Purpose of Disbursement Email Acquisition  Candidate Name  Category/ Type  Disbursement For:  Senate Primary General Disbursement To 10038  Purpose of Disbursement Email Acquisition  Candidate Name  Category/ Type  Transaction ID : \$B218.4847  Amount of Each Disbursement this Period Category/ Type  Transaction ID : \$B218.4847  Amount of Each Disbursement this Period Category/ Type  Transaction ID : \$B218.4847  Amount of Each Disbursement this Period Category/ Type  Transaction ID : \$B218.4847  Amount of Each Disbursement this Period Category/ Type  Transaction ID : \$B218.4847  Amount of Each Disbursement this Period Category/ Type  Transaction ID : \$B218.4847  Amount of Each Disbursement this Period Category/ Type  Memo Item  Date of Disbursement  Category/ Type  Memo Item  Transaction ID : \$B218.4847  Amount of Each Disbursement this Period Category/ Type  Memo Item  Transaction ID : \$B218.4847  Amount of Each Disbursement this Period Category/ Type  Memo Item  Transaction ID : \$B218.4847  Amount of Each Disbursement this Period Category/ Type  Memo Item  Transaction ID : \$B218.4847  Amount of Each Disbursement this Period Category/ Type  Memo Item  Transaction ID : \$B218.4847  Amount of Each Disbursement this Period Category/ Type  Memo Item  Transaction ID : \$B218.4847  Transaction ID : \$B218.4847  Amount of Each Disbursement this Period Category/ Type  Memo Item  Transaction ID : \$B218.4847  Transaction ID : \$B218	First Data Corporation				
Allanta GA 30342  Purpose of Disbursement Credit Card Processing Fees Candidate Name  Other Spught:	Suite 2000				
Purpose of Disbursement Credit Card Processing Fees Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ State: District:  Full Name (Last, First, Middle Initial) Transaction ID : SB21B.4847  Primary General Other (specify) ▼  Date of Disbursement  Transaction ID : SB21B.4847  Amount of Each Disbursement  Transaction ID : SB21B.4847  Amount of Each Disbursement this Period  Other (specify) ▼  Transaction ID : SB21B.4847  Amount of Each Disbursement  Transaction ID : SB21B.4847  Amount of Each Disbursement  Transaction ID : SB21B.4847  Amount of Each Disbursement  Other (specify) ▼  Ison to the Category of Disbursement this Period  Other (specify) ▼  Date of Disbursement  Transaction ID : SB21B.4847  Amount of Each Disbursement this Period  Other (specify) ▼  Date of Disbursement this Period  Category of Disbursement  Tull Name (Last, First, Middle Initial)  Date of Disbursement  Category of Disbursement  Category of Disbursement  Date of Disbursement  Transaction ID : SB21B.4847  Amount of Each Disbursement this Period  Amount of Each Disbursement this Period  Office Sought: House Senate Primary General Other (specify) ▼  Date of Disbursement  Amount of Each Disbursement this Period  Category of Disbursement  Category of Disbursement  Date of Disbursement this Period  Office Sought: House Senate Primary General Other (specify) ▼  Date of Disbursement this Period  Amount of Each Disbursement this Period  Category of Disbursement	-			Transaction ID : SB21B.4819	
Category/ Type  Office Sought:  House	Purpose of Disbursement	30342			
Office Sought: House Senate Primary General Other (specify) ▼    State: District: Senate President State: District: Senate President Other (specify) ▼   Date of Disbursement For: Memolitem				Amount of Each Disbursement this Period	
Office Sought:	Candidate Name			51.30	
State: District: Full Name (Last, First, Middle Initial)  The Campaign Workshop  Mailing Address 1660 L Street #506  City Washington DC 10036  Purpose of Disbursement Email Acquisition Candidate Name  Other (specify)   City State Zip Code DC 10036  Transaction ID: SB21B.4847  Amount of Each Disbursement this Period  Other (specify)   Memo Item  Amount of Each Disbursement  Email Acquisition  Category/ Type  Date of Disbursement this Period  Category/ Type  Date of Disbursement this Period  Category/ Type  Date of Disbursement this Period  Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement  Category/ Type  Office Sought: House Senate Primary General  Other (specify)   Category/ Type  Office Sought: House Senate Primary General  Other (specify)   Office Sought: House Senate Primary General  Other (specify)   Other (specify)   Type  Memo Item  Memo Item  Amount of Each Disbursement this Period  Other (specify)   Memo Item  Amount of Each Disbursement this Period  Type  Memo Item  Memo Item  Memo Item  Subtrotal of Disbursements This Page (optional)	Senate	Primary General	туре	Memo Item	
Mailing Address 1660 L Street #506  City State Zip Code Washington DC 10036  Purpose of Disbursement Email Acquisition  Candidate Name Disbursement For: Senate Primary General Other (specify) ▼  Category/ Type  City State Zip Code  DC 10036  Transaction ID : SB21B.4847  Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement  Transaction ID : SB21B.4847  Amount of Each Disbursement this Period  Category/ Type  Date of Disbursement this Period  Category/ Type  City State Zip Code  Purpose of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District: Memo Item  Amount of Each Disbursement this Period  Category/ Type  Memo Item  Memo Item  State: District: Memo Item  State: District: Memo Item		(-  <b>/</b> /			
City Washington DC 10036  Purpose of Disbursement Email Acquisition  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  Category/ Type  Memo Item  Date of Disbursement this Period  Category/ Type  Memo Item  Date of Disbursement this Period  Category/ Type  Office Sought: House Disbursement For: Category/ Type  Office Sought: House Disbursement For: Category/ Type  Office Sought: House Disbursement For: Memo Item  Date of Disbursement this Period  Candidate Name  Candidate Name  Office Sought: House Primary General Other (specify) ▼  Substotal Other (specify) ▼  1551.30	3. The Campaign Workshop			M = M / D = D / Y = Y = Y	
Washington DC 10036 Purpose of Disbursement Email Acquisition  Candidate Name  Category/ Type  Tensident State: District:  Full Name (Last, First, Middle Initial)  City State Zip Code  Purpose of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Memo Item  Memo Item  Memo Item  Memo Item  Substitute  Amount of Each Disbursement this Period					
Purpose of Disbursement Email Acquisition  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  Amount of Each Disbursement this Period  Memo Item  Date of Disbursement  Category/ Type  Date of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General  Candidate Name  Disbursement For: Category/ Type  Office Sought: House Senate Primary General  Other (specify) ▼  Substitute  State: District:  Substitute  Disbursement For: General Other (specify) ▼  Substitute  Substitute  Substitute  Substitute  Disbursement For: General Other (specify) ▼  Substitute  Substitute  Substitute  Substitute  Amount of Each Disbursement this Period  Amount of Each Disbursement this Period  Type  Memo Item  1551.30	-	· ·		Transaction ID : SB21B.4847	
Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial)  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Amount of Each Disbursement this Period  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Substortal of Disbursements This Page (optional)	Purpose of Disbursement	1,000		Amount of Each Disbursement this Period	
Office Sought: House Senate Primary General Other (specify) State: District:  Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Senate Primary General Other (specify) Memo Item  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Office Sought: House Primary General Other (specify) Memo Item  Memo Item  Memo Item  Amount of Each Disbursement this Period  Office Sought: Primary General Other (specify) Memo Item  State: District:	Candidate Name				
Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President  State: District:  Subtrotal of Disbursements This Page (optional)	Senate President	Primary General		Memo Item	
Mailing Address  City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Other (specify) ▼  State: District:  Date of Disbursement  Amount of Each Disbursement this Period  Memo Item  1551.30					
City State Zip Code  Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate Primary General Other (specify)  State: District:  SUBTOTAL of Disbursements This Page (optional)	ran Name (East, First, Middle Initial)				
Purpose of Disbursement  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President State: District:  Subtotal of Disbursements This Page (optional)	Mailing Address				
Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify)  State: District:  Substract: Disbursements This Page (optional)	City	State Zip Code			
Candidate Name  Category/ Type  Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼  SUBTOTAL of Disbursements This Page (optional)	Purpose of Disbursement				
Office Sought: House Senate Primary General Other (specify)  State: District: Memo Item  Substituting Substitution State Substitution State Substitution State Substitution State Substitution Substitution State Substitution State Substitution State Substitution Subs	Candidate Name				
AFFA 20	Senate President	Primary General	.,,,,		
4554.20	SUBTOTAL of Disbursements This Page (optional)			1551.30	
TOTAL This Period (last page this line number only)				1551.30	

TEMIZED DISBURSEMENTS	llaa aanarata aahadula(a)	FOR LINE NUMBER: PAGE 12 OF 18 check only one)  21b 22 X 23 24 25 26 27 28a 28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)  LATINO VICTORY FUND	ents may not be sold or used by e and address of any political co	any person for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)  A- CATHERINE CORTEZ MASTO FO  Mailing Address 8020 SOUTH RAINBOW BLVD #10	0-112	Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
LAS VEGAS Purpose of Disbursement Contribution  Candidate Name  CATHERINE CORTEZ MASTO  Office Sought: House Disbursem  Senate		Transaction ID : SB23.4821  Amount of Each Disbursement this Period  tegory/ Type  Memo Item
SANTA ANA Purpose of Disbursement Contribution  Candidate Name LORETTA SANCHEZ  Office Sought: House Senate President State: CA District: 00	tate Zip Code CA 92706	Date of Disbursement  M M M / D D / Y Y Y Y Y  O4 25 2016  Transaction ID : SB23.4822  Amount of Each Disbursement this Period  tegory/ Type  Memo Item
Full Name (Last, First, Middle Initial)  Mailing Address		Date of Disbursement
Purpose of Disbursement  Candidate Name  Office Sought: House Disbursem Senate	1	Amount of Each Disbursement this Period tegory/ Type  Memo Item

ITEMIZED DISBURSEMENTS	I llog congrete cohodule(c) I	FOR LINE NUMBER: PAGE 13 OF 18 check only one)  21b 22 23 24 25 26 27 28a 28b 28c X 29 30b
Any information copied from such Reports and States or for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full)  LATINO VICTORY FUND  Full Name (Last, First, Middle Initial)	ments may not be sold or used by ne and address of any political co	any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.
A. Martin Diego Garcia  Mailing Address 700 14th Street NW 2nd Floor		Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Washington Purpose of Disbursement Event Entertainment - Non-contribution Account Candidate Name  Office Sought: House Disburse	ment For:	Transaction ID : SB29.4826  Amount of Each Disbursement this Period 1200.00  Memo Item
State: District:  Full Name (Last, First, Middle Initial)  B. Addictive Audio	Primary General Other (specify) ▼	Date of Disbursement  04 20 2016
New York Purpose of Disbursement Event Entertainment - Sound Equipment Candidate Name		Transaction ID : SB29.4826.0  Amount of Each Disbursement this Period  tegory/ Type  Memo Item
Full Name (Last, First, Middle Initial)  C. Carlos J. Torres  Mailing Address HC 1 Box 7032		Date of Disbursement  M M 20 2016  Transaction ID: SB29.4826.1  Amount of Each Disbursement this Period 1000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE NUMBER: PAGE 14 OF 18 (check only one)		
II LIVIIZED DISDUNSLIVIEN IS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 26 26 28c X 29 30l	
Any information copied from such Reports and Staten or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) LATINO VICTORY FUND				
Full Name (Last, First, Middle Initial)			Date of Dishuraneset	
A. Nashban Mansur LLC			Date of Disbursement	
Mailing Address 360 W. 43rd Street #S9C			04 07 2016	
,	State Zip Code		Transaction ID : SB29.4825	
New York Purpose of Disbursement	NY 10036			
Fundraising Consulting - Non-contribution Account			Amount of Each Disbursement this Period	
Candidate Name		Category/	2000.00	
Office Sought: House Disburser	nent For:	Туре		
	Primary General		Memo Item	
	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)  B. The Campaign Workshop			Date of Disbursement	
			M M / D D / Y Y Y Y	
Mailing Address 1660 L Street #506			04 18 2016	
,	State Zip Code DC 10036		Transaction ID : SB29.4845	
Washington Purpose of Disbursement	DC 10036			
Internet Advertising for Issue Advocacy - Non-contr	ibution Account		Amount of Each Disbursement this Period	
Candidate Name		Category/	28560.96	
Office Sought: House Disbursen	nent For:	Туре	Memo Item	
	Primary General		- meno item	
	Other (specify) ▼			
State: District: Full Name (Last, First, Middle Initial)				
C.			Date of Disbursement	
			M = M / D = D / Y = Y = Y	
Mailing Address				
City	State Zip Code			
Purpose of Disbursement				
			Amount of Each Disbursement this Period	
Candidate Name		Category/		
Office Sought: House Disburser	ment For:	Туре	Mama Itam	
Senate	Primary General		Memo Item	
	Other (specify) ▼			
State: District:				
SUBTOTAL of Disbursements This Page (optional)			30560.96	
OUDITION OF DISDUISEMENTS THIS Page (OPHONAI)		·····		
TOTAL This Period (last page this line number only)			31760.96	

## SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 15 OF
FOR LINE NUMBER:
(check only one)

9 X 10

18

	ME OF COMMITTEE (In Full) ATINO VICTORY FUND							
	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  Perkins Coie			Nature of Debt (Purpose): Legal Services				
	Mailing Address 700 13th Street NW							
	City State Washington	Zip Code DC 20005						
	Outstanding Balance Beginning This Period			Transaction ID : SD10.4848				
	0.00	_						
	Amount Incurred This Period	Paym	nent This Period	Outstanding Balance at Close of This Period				
	1839.00		0.00	1839.00				
	B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):				
	Mailing Address							
	City State	Zip Code						
	Outstanding Balance Beginning This Period  Amount Incurred This Period	Payn	nent This Period	Outstanding Balance at Close of This Period				
ı	C. Full Name (Last, First, Middle Initial) of Debto	r or Creditor		Nature of Debt (Purpose):				
	Mailing Address							
	City	State	Zip Code					
	Outstanding Balance Beginning This Period  Amount Incurred This Period	Payn	nent This Period	Outstanding Balance at Close of This Period				
		7	7					
1)	SUBTOTALS This Period This Page (optional)			. 1839.00				
2)	TOTALS This Period (last page this line number	only)	······································	1839.00				
3)	TOTAL OUTSTANDING LOANS from Schedule (	C (last page onl	y) <b>&gt;</b>	0.00				
4)	ADD 2) and 3) and carry forward to appropriate	line of Summary	y Page (last page only)	1839.00				

MIZED INDEPENDENT EXPENDITUE	RES				PAGE 16 FOR LINE	OF 18 24 OF FORM 3X
ME OF COMMITTEE (In Full)				FEC	IDENTIFICAT	ION NUMBER ▼
ATINO VICTORY FUND				С	C00562777	
eck if 24-hour report 48-hour report	New	report Amends rep	ort filed	on M M	/ D = D /	Y Y Y Y Y
Full Name of Payee Solidarity Strategies		☐ Memo	Item	Date of Pu	blic Distribution	n/Dissemination 2016
Mailing Address P.O. Box 52092				Amount		2010
City Washington	State DC	Zip Code 20091			ID: SE.4677 sbursement or	25500.15
Purpose of Expenditure Direct Mail - Non-contribution Account		Category/ Type		04	13	2016
Name of Federal Candidate  JOSELINE A. PENA-MELNYK		Support Oppose	Office	Sought:	X House Senate	District: 04 State: MD
Calendar Year-To-Date Per Election for Office Sought		25500.15	Disbu 2016	Other	: X Primar	y General
Full Name of Payee Solidarity Strategies		☐ Memo It	em	Date of Pu	iblic Distribution	n/Dissemination 2016
Mailing Address P.O. Box 52092				Amount		
City	State	Zip Code		T		25500.15
Washington	DC	20091			ID: SE.4682 sbursement or	Obligation
Purpose of Expenditure Direct Mail - Non-contribution Account		Category/ Type		04 04	15	2016
Name of Federal Candidate		X Support	Office	Sought:	X House	District: 04
JOSELINE A. PENA-MELNYK		Oppose		President	Senate	State: MD
Calendar Year-To-Date Per Election for Office Sought		51000.30	Disbu 2016		r:	g General
(a) SUBTOTAL of Itemized Independent Expendent	ditures					51000.30
(b) SUBTOTAL of Unitemized Independent Exp			>			
(c) TOTAL Independent Expenditures			▶			

with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Sara Le Brusq	[Electronically Filed]	Date	05 /	10	/	2016
Signature						

### SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

	PAGE FOR LI	17 NE 24	OF 4 OF FC	18 DRM 3X			
С	DENTIFICATION NUMBER ▼						

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
LATINO VICTORY FUND		C C00562777
Check if 24-hour report 48-hour report New report	Amends report file	ed on Mam / Dad / Yayayay
Full Name of Payee	Memo Item	Date of Public Distribution/Dissemination
Solidarity Strategies  Mailing Address R.O. Boy 52003		04 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
P.O. Box 52092		Amount
City State Zip	Code	24235.68
	091	Transaction ID : SE.4686 Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail - Non-contribution Account	Type	04 / 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Offi	ice Sought:     House District: 04
JOSELINE A. PENA-MELNYK	Oppose	President Senate State: MD
Calendar Year-To-Date Per Election for Office Sought	Dis 75235.98 201	
	Memo Item	Other (specify)
Full Name of Payee Solidarity Strategies	□ Memortem	Date of Public Distribution/Dissemination  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address P.O. Box 52092		Amount
City State Zip	Code	25500.00
	0091	Transaction ID : SE.4688  Date of Disbursement or Obligation
Purpose of Expenditure Phone Bank - Non-contribution Account	Type	04 / 18 / 2016
Name of Federal Candidate	X Support Off	ice Sought:
JOSELINE A. PENA-MELNYK	Oppose	President Senate State: MD
Calendar Year-To-Date Per Election for Office Sought	00735.98 Dis 20	Sbursement For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	····	49735.68
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	11212
(c) TOTAL Independent Expenditures	······	
Under penalty of perjury I certify that the independent expenditures rep with, or at the request or suggestion of, any candidate or authorized coparty committee) any political party committee or its agent.		
Sara Le Brusq [Electronicall	ly Filed] Date	05 10 2016
Signature	24.6	

	age# 201605189015534777				
	CHEDULE E (FEC Form 3)				
ΓΕ	EMIZED INDEPENDENT EXPEND	ITURES			PAGE 18 OF 18 FOR LINE 24 OF FORM 3X
NΑ	AME OF COMMITTEE (In Full)				
	ATINO VICTORY FUND			C	IDENTIFICATION NUMBER ▼  C00562777
Ch	neck if 24-hour report 48-hour	report New repo	ort Amends repo	rt filed on	/ D = D / Y = Y = Y
	Full Name of Payee Solidarity Strategies		☐ Memo It	em Date of Pub	lic Distribution/Dissemination
	Mailing Address P.O. Box 52092			Amount	20 2016
	City	State	Zip Code		24235.68
	Washington	DC	20091	Transaction Date of Disk	
	Purpose of Expenditure Direct Mail - Non-contribution Account		Category/ Type	M 04	/ D D / Y Y Y Y Y Y Y 2016
	Name of Federal Candidate		X Support	Office Sought:	House District: 04
	JOSELINE A. PENA-MELNYK		Oppose	President	Senate State: MD
	Calendar Year-To-Date Per Election for Office Sought		124971.66	Disbursement For: 2016 Other (s	X Primary General   specify) ▶
	Full Name of Payee Solidarity Strategies		☐ Memo Ite	m Date of Pub	olic Distribution/Dissemination
	Mailing Address P.O. Box 52092			Amount	
	City	State	Zip Code		21250.00
	Washington	DC	20091	Transaction Date of Dis	ID : SE.4781 bursement or Obligation
	Purpose of Expenditure Phone Bank - Non-contribution Account		Category/ Type	04	23 / 2016
	Name of Federal Candidate		X Support	Office Sought:	X House District: 04
	JOSELINE A. PENA-MELNYK		Oppose	President	Senate State: MD
	Calendar Year-To-Date Per Election for Office Sought		146221.66	Disbursement For: 2016 Other (	Primary General Specify) ▶
	(a) SUBTOTAL of Itemized Independent	Expenditures		<b>&gt;</b>	45485.68
	(b) SUBTOTAL of Unitemized Independent	nt Expenditures		· •	1 4 1 4

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

(c) TOTAL Independent Expenditures.....

Sara Le Brusq	[Electronically Filed]	Date	05	/ 10	2016
Signature					

146221.66